

# West Virginia Voter Registration Application

Please follow these steps to complete this form. (Please PRINT in blue or black ink.)

Box 1: Indicate if this is a new registration, party change, or name/address change.

Box 2.\* Provide your full legal name, including any suffix (Jr., Sr., III, etc.).

Box 3.\* Provide your date of birth (MM/DD/YYYY). You must be at least seventeen years old to apply to register to vote and will be eighteen on or before the next general election.

Box 4.\* Enter your WV driver's license or DMV-issued non-driver's ID number. If you do not have a WV driver's license or DMV-issued ID, enter the last four digits of your social security number. If you do not have a driver's license, DMV ID or a social security number, enter the word "NONE". An ID number will be assigned to you.

Box 5.\* Line 1 Provide your legal residence address (do not enter a P.O. Box.)\*\* Include the name of the county where you reside.  
Line 2 Provide your mailing address, if different from your legal residence address.

Box 6: Provide an email address.

Box 7: Indicate your gender.

Box 8: Enter the address where you were last registered to vote and the name under which you were registered.

Box 9: Provide a telephone number.

Box 10: Select your party choice. If you do not make a selection, you will be registered as "unaffiliated." Some political parties may allow voters not affiliated with their party to cast a ballot in their party's primary elections.

Box 11: Check if you would like to be contacted about serving as a poll worker.

Box 12.\* Carefully read the statement. If the statement is true, sign and date where indicated. Knowingly providing false information is perjury, punishable on conviction by confinement in a penitentiary for not less than one nor more than ten years.

**QUESTIONS?**  
Contact your local county clerk or go to [www.wvsos.com](http://www.wvsos.com)  
Call toll-free  
1-866-767-8683  
West Virginia Secretary of State

**REGISTRATION DEADLINE:** You may submit a registration application at any time. However, in order to vote in an election, you must register twenty-one (21) days before that election.

For county clerk contact information, including mailing addresses, please visit [www.wvsos.com](http://www.wvsos.com).

If you are registering to vote for the first time in West Virginia, or for the first time in this county and you have not cast a vote in a federal election in this state, you must submit a copy of a current and valid ID with this application or the first time you vote. To submit with this form, include: 1) a copy of a current and valid photo ID, or 2) a copy of a current utility bill, bank statement, government check, paycheck or other government document that shows your name and current residence address.

**\*Required information. Your registration cannot be processed without this information.**

**\*\*Overseas citizens who no longer reside in the U.S. may enter the last address at which they legally resided. Uniformed service voters should check with the Federal Voting Assistance Program for current instructions: [www.fvap.gov](http://www.fvap.gov).**

				FOR OFFICIAL USE	
<b>Are you a citizen of the United States of America?</b>				<input type="checkbox"/> YES <input type="checkbox"/> NO	
<b>Will you be 18 years of age on or before the next general election?</b>				<input type="checkbox"/> YES <input type="checkbox"/> NO	
<b>If you answered "no" to either of these questions, do not complete this form.</b>				PRECINCT:	
<b>1</b> <input type="checkbox"/> NEW REGISTRATION <input type="checkbox"/> PARTY CHANGE <input type="checkbox"/> NAME/ADDRESS CHANGE				VOTER ID:	
<b>2*</b> LAST NAME FIRST NAME MIDDLE NAME SUFFIX (Circle) Jr. Sr. II III IV V				ID CONFIRMATION:	
<b>3*</b> DATE OF BIRTH / /				DATE RECEIVED:	
<b>4*</b> DRIVER'S LICENSE # or DMV ISSUED ID #: If <u>neither</u> , enter the last four digits of your Social Security #: XXX-XX- - - - -					
<b>5*</b> LEGAL RESIDENCE (HOUSE NUMBER/STREET NAME, CITY/ZIP) COUNTY					
MAILING ADDRESS (IF DIFFERENT FROM LEGAL RESIDENCE ADDRESS)					
<b>6</b> EMAIL					
<b>8</b> YOUR NAME AND ADDRESS WHERE YOU LAST REGISTERED TO VOTE				<b>7</b> GENDER <input type="checkbox"/> M <input type="checkbox"/> F	
				<b>9</b> TELEPHONE (Office Use)	
<b>10</b> PARTY: <input type="checkbox"/> DEMOCRATIC <input type="checkbox"/> REPUBLICAN <input type="checkbox"/> MOUNTAIN <input type="checkbox"/> UNAFFILIATED <input type="checkbox"/> OTHER _____				<b>11</b> <input type="checkbox"/> I WOULD LIKE TO BE A POLL WORKER	
<b>12*</b> I swear or affirm that: <ul style="list-style-type: none"><li>I am a citizen of the United States;</li><li>I am at least 17 years of age and will be 18 on or before the next general election;</li><li>My legal West Virginia residence address is listed in Box 5;</li><li>I am not under conviction, probation or parole for election bribery, treason, or any felony; and</li><li>I have not been judged incompetent by a court of competent jurisdiction.</li></ul>				DATE: _____  SIGNATURE _____	
				PRECINCT:	

R-2  
08/11

ITEMS MARKED WITH AN "\*" ARE REQUIRED FOR PROCESSING THIS APPLICATION.

OFFICE USE ONLY (Please remember to enter all information in the voter registration system)